Utah Insurance Department State Office Building, Room 3110 Salt Lake City, UT 84114

Phone: (801) 538-3800 T. Greening, Investigator Phone: (801) 538-3786

BEFORE THE INSURANCE COMMISSIONER STATE OF UTAH

UTAH INSURANCE DEPARTMENT,

COMPLAINANT

NOTICE OF INFORMAL AGENCY ACTION AND ORDER

VS

ACCESS TITLE COMPANY, INC.

1455 S State Street #C Orem, UT 84097 License No. 4571 RESPONDENT Docket No. 2015-064 PC Enf. Case No. 3624 Judge Mark E. Kleinfield Administrative Law Judge

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. §§ 31A-2-201 and 63G-4-201 and Utah Admin. Code R590-160. Based upon information contained in agency files or known to the Department, the Department asserts the following facts:

FACTS

- 1. Respondent is a resident title insurance agency authorized to do the business of insurance in the State of Utah, holding license number 4571.
- 2. Respondent failed to file its Annual and Controlled Business reports for calendar year 2014, by the due date of April 30, 2015.
- 3. As of the date of this Notice of Agency Action and Order, no response has been the Annual Reports have not been filed.

BASED UPON THE FOREGOING FACTS

1. In failing to file the Annual and Controlled Business for calendar year 2014 by the due date of April 30, 2015, Respondent violated Utah Code § 31A-23a-413 and Utah Admin. Rule R592-11-3(4).

Based upon the foregoing facts, the Commissioner now enters the following Order:

<u>ORDER</u>

IT IS HEREBY ORDERED:

- l. Respondent is assessed an administrative forfeiture in the amount of \$1,000. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.
- 2. Respondent shall file its Annual and Controlled Business reports for calendar year 2014 no later than ten (10) days after the date this Order becomes final.
- 3. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

NOTIFICATION

If you request a hearing regarding this matter, please contact the Investigator, Tammy Greening at (801) 538-3786. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$5,000.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS // day of Jone, 2015.

TODD E. KISER

INSURANÇE COMMISSIONER

MARK E. KLEINFIÉLD

Administrative Law Judge

Utah Insurance Department

State Office Building, Room 3110

Salt Lake City, Utah 84114

Telephone (801) 538-3800

CERTIFICATE OF MAILING

The undersigned certifies on this date, a true and correct copy of the forgoing NOTICE OF INFORMAL AGENCY ACTION AND ORDER was mailed, postage prepaid, to the following:

Access Title Company, Inc. 1455 S State Street #C Orem, UT 84097

&

docs@accesstitleco.com

DATED this 11Th June, 2015

LINDA HARDY

UTAH INSURANCE DEPARTMENT STATE OFFICE BUILDING, ROOM 3110 SALT LAKE CITY, UT 84114-6901



Insurance Department

Governor SPENCER J. COX

Lieutenant Gavernar

UTAH Invoice - Original

WAYNE G TANNER ACCESS TITLE COMPANY, INC 1455 SOUTH STATE STREET STE C OREM UT 84097

Printed Date: June 11, 2015 Invoice Date: June 11, 2015 Balance Due: \$1,000.00 Due Date: July 16, 2015

Invoice ID: 773804 Payor ID: 6951

Date 06-11-2015 **Item Description** Monetary Penalty Agency Amount

\$1,000.00

E-Case 3624 Docket 2015-064 PC

No Adjustments

No Payments

Balance Amount Due \$1,000.00

UTAH **Invoice - Original**

Make check payable to: Utah Insurance Department

Send payment to:

Utah Insurance Department 3110 State Office Building Salt Lake City, UT 84114-6901 Invoice Date: June 11, 2015

Balance Due: \$1,000.00

Due Date: July 16, 2015 Invoice ID:

773804

Payor ID: 6951

E-Case 3624 Docket 2015-064 PC

Detach and Return this Voucher with Payment Payments Will Not Be Processed without Voucher